

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000005267

**Entity Name:** ALTERRA HOME LOANS, LLC

**Current Principal Place of Business:**

350 S. RAMPART BLVD  
SUITE 310  
LAS VEGAS, NV 89145-5717

**FILED**  
**Apr 05, 2018**  
**Secretary of State**  
**CC5402090014**

**Current Mailing Address:**

350 S. RAMPART BLVD  
SUITE 310  
LAS VEGAS, NV 89145-5717 US

**FEI Number: 20-8083209**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

SANCHEZ-CIFUENTES, AMAURY  
3878 SHERIDAN ST.  
HOLLYWOOD, FL 33021 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name DEHERRERA, FELIX E  
Address 350 S RAMPART BLVD  
SUITE 310  
City-State-Zip: LAS VEGAS NV 89145

Title MGR  
Name MADIEDO, JASON  
Address 350 S RAMPART BLVD  
SUITE 310  
City-State-Zip: LAS VEGAS NV 89145

Title MGR  
Name NARVAEZ, MIGUEL A  
Address 350 S RAMPART BLVD  
SUITE 310  
City-State-Zip: LAS VEGAS NV 89145

Title MGR  
Name GEORGE, STEPHEN J  
Address 350 S RAMPART BLVD  
SUITE 310  
City-State-Zip: LAS VEGAS NV 89145

Title MGR  
Name STAFFORD, MARK T  
Address 350 S RAMPART BLVD  
SUITE 310  
City-State-Zip: LAS VEGAS NV 89145

Title MGR  
Name ROBBINS, JOHN M  
Address 350 S RAMPART BLVD  
SUITE 310  
City-State-Zip: LAS VEGAS NV 89145

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: MIGUEL A NARVAEZ**

**CPO**

**04/05/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date